BEST AVAILABLE COPY

PATENT APPLICATION FEE DETERMINATION RECORD Effective December 8, 2004 09/899,83/														
CLAIMS AS FILED - PART I (Column 1) (Column 2)									ENTI		OR	OTHE	R TH	
TOTAL CLAIMS								RATE FEE		ÆE	7	RATE	_	EE
FOR			NuMber FILED		MANBER EXTRA			BASIC FEE 150.00		50.00	OR	BASIC FE	E 30	0.00
TOTAL CHARGEABLE CLAIMS			minus 20=		•			X\$ 25			OR	X\$50=	T	
INDEPENDENT CLAIMS				minus 3 =				X100-			OR	X200=	十	
MI	ATIPLE DEPE	NDENT CLAIM	PRESENT	RESENT				+180=		·	1	+360=	十	-
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL	4		OR OR	TOTAL	╁╾	
CLAIMS AS AMENDED - PART II									· [Jon	OTHER	TH/	AN
(Column 1)			(Column 2)			(Column 3)	3) SMALL			ΠY	OR	SMALL		
AMENDMENT A	1/12/05	REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	TIC	DDI- DNAL EE	-	RATE	TIC	DDI- NAL EE
	Total	. 21	Minus .	-2	<u> </u>	•		X\$ 25=		١.	OR	X\$50=	,	
	Independent	• <u>3</u>	Minus	DENDENT	<u> </u>	1-		X100=			OR	X200=	П	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+180=			OR	+360=	П	
											OR	TOTAL	1	\dashv
ن	1/25/0		ADDIT. FE											
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	TIO	NAL E		RATE	AD TIO	NAL
NON NO	Total	. 21	Minus	<u>-1</u> /		· +		X\$ 25=	1		OR	X\$50=		
AME	independent	• 3 NTATION OF M	Minus	900 3	CI AINA	•	[X100=			OR	X200=		
	rinsi Prese	·	JETIPLE DE	PERDENT	·			+180=			OR	+360=		
		, A	TOYAL DON. FEE			OR A	DOTAL DOTT. FEE		4					
		(Column 1)	<u></u>	(Colum		(Column 3)	_	_		_	_			
AMENDMENT C		AFTER PREVIO		PREVIOU PAID F	er JSLy	PRESENT EXTRA	L	RATE	ADDI- TIONAL FEE			RATE	ADI TION FE	VAL
	Total .	•	Minus	188		•		X\$ 25=			OR .	X\$50=	•	7
	Independent	•	Minus	***	20 400 c	•	T	X100=		٦,	OR	X200=		7
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM											+360=		一
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. * If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." April TOTAL April TOTAL													4	
	the "Highest Nu	mber Previously Pa mber Previously Pa ber Previously Pal	M For IN TH	S SPACE IS	less tha	a S. enter "3."		DIT. FEE	propriz		~4	DOTT. FEE	•	1
	•		_					_						

FOREI PTO-873 (Rain, 10/04)

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